PTO/SB/82 (01-08)

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## **REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY** AND **CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/693,699
Filing Date	27 Oct 2003
First Named Inventor	KHALILI, Farld Bruce
Art Unit	3733
Examiner Name	Swiger III, James L
Attorney Docket Number	VER 2226-

I hereby revoke all previous powers of attorney given in the above-identified application.									
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Applicant/Inventor.									
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)									
		RE of Applicant			Record	-			_
Signature FMM	>/40h	al O							
Name Farid Bruce Ki	HALILI								
Date 5 25	107		Te	elephone	203	3~2	\80 <sub>-</sub>	9340	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.									•
	orms are submitted.								-

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